Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 1 of 68

| Fill in this information to identify your case: | | | |
|---|-------------------------------|--|---------------------|
| United States Bankruptcy Court for the: | | | |
| Northern District of: Illinois (State) | <u></u> | | |
| Case number (if known) | Chapter you are filing under: | | |
| | ✓ Chapter 7 | | |
| | Chapter 11 | | |
| | Chapter 12 | | Check if this is an |
| | Chapter 13 | | amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|--|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name Write the name that is on | Juanita First name | First name |
| your government-issued picture identification (for example, your driver's license or passport | Middle name Braggs | Middle name |
| Bring your picture | Last name | Last name |
| identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you have used in the last | First name | First name |
| 8 years Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- 4434 | xxx - xx- |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 2 of 68

| D | ebtor 1 Juanita First Name | Middle Name Last Name | Case number (if known) |
|----|--|--|--|
| | i ii st ivaine | Wildle Name Last Name | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 8644 S 86th Ave Number Street Apt 213 | Number Street |
| | | Justice Illinois 60458 | |
| | | City State Zip Code Cook | City State Zip Code |
| | | County | County |
| | | - | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to |
| | | notices to you at this mailing address. | this mailing address. |
| | | , | S . |
| | | Number Street | Number Street |
| | | | |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 3 of 68

| De | ebtor 1 Juanita | | | Case number (if kno | wn) |
|-----|---|--|---|---|--|
| | First Name | Middle Name | Last Name | | |
| Pa | rt 2: Tell the Court Abo | ut Your Bankruptcy Case | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief descrip Bankruptcy (Form B2010)). Also Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. | How you will pay the fee | more details about how y cashier's check, or mone may pay with a credit care. I need to pay the fee in i Individuals to Pay Your F I request that my fee be judge may, but is not required the official poverty line the | you may pay. Typically, if you you may pay. Typically, if you or or check with a pre-printer installments. If you choose Filing Fee in Installments (Or example waived (You may request quired to, waive your fee, and applies to your family sixyou must fill out the Application. | ou are paying the submitting your ed address. this option, sig official Form 103 this option only d may do so onl ze and you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of inable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. | Have you filed for bankruptcy within the last 8 years? | V No. Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No. Yes. Debtor District Debtor District | <u>W</u> hen | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. | Do you rent your residence? | No. Go to line 12 | | | ot You (Form 101A) and file it with |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 4 of 68

Debtor 1 Juanita Braggs Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? Ⅵ I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 5 of 68

Debtor 1 Juanita Braggs Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 6 of 68

Braggs Debtor 1 Juanita Case number (if known) First Name Middle Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded ✓ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Juanita Braggs Signature of Debtor 1 Signature of Debtor 2 Executed on __3/15/2018 Executed on MM / DD / YYYY MM / DD / YYYY

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 7 of 68

| Debtor 1 Juanita | | Braggs | Case number (if kr | no wn) |
|--|----------------------------|----------------------|------------------------------|---|
| First Name | Middle Name | Last Name | <u> </u> | |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 1 | 2, or 13 of title 11, United | ve informed the debtor(s) about States Code, and have explained the so certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § | 342(b) and, in a case in w | hich § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the | information in the schedu | les filed with the petition is incorrect. |
| attorney, you do not | 4.5 | | | |
| need to file this page. | /s/ Elise Harmening | | Date | 3/15/2018 |
| | Signature of Attorney for | or Debtor | MN | /I / DD / YYYY |
| | | | | |
| | | | | |
| | Elise Harmening | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 20 S. Clark Street | | | |
| | Street | | | |
| | 28th Floor | | | |
| | | | | |
| | Chicago | | Illinois | 60603 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3124852095 | Email address | eharmening@semradlaw.com |
| | | | | - |
| | 6325657 | | Illinois | |
| | Bar number | | State | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 8 of 68

| Fill in this infor | mation to identify your ca | ase: | |
|------------------------|----------------------------|-------------|----------------------|
| Debtor 1 | Juanita | | Braggs |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| П | Check if this is an |
|---|---------------------|
| _ | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$17,900.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$17,900.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | 445.004.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$15,084.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$44,014.00 |
| Your total liabilities | \$59,098.00 |
| art 3: Summarize Your Income and Expenses | |
| art 3: Summarize Your Income and Expenses | |
| | |
| . Schedule I: Your Income (Official Form 106I) | \$3,095.34 |
| . Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$3,095.34 |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 9 of 68

| Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | |
|---|--|
| 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | |
| No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$4,446.28 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | |
| ✓ Yes. 7. What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | |
| 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | |
| Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | |
| Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | |
| family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | |
| this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$4,446.28 | |
| 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$4,446.28 | |
| Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | |
| O Constitution and a language of alaims from Bort 4 line C of Cabadula E/E | |
| O Constitution of the state of | |
| 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | |
| From Part 4 on Schedule E/F, copy the following: Total claim | |
| 9a. Domestic support obligations (Copy line 6a.) \$0.00 | |
| <u> </u> | |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | |
| 9d. Student loans. (Copy line 6f.) \$0.00 | |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | |
| priority claims. (Copy line 6g.) | |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$0.00 | |

\$0.00

9g. **Total.** Add lines 9a through 9f.

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 10 of 68

| Fill in this | information to identify your o | ase: | | | |
|--|---|---|--|---|--|
| Debtor 1 | Juanita | | Braggs | | |
| Debtor 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if fi | ling) First Name | Middle Name | Last Name | | |
| | ates Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case num | | | (State) | | |
| (If known) | 15 100A/D | | | | Check if this is an |
| | al Form 106A/B | _ | | | amended filing |
| Sche | dule A/B: Prope | erty | | | 12/1 |
| category v responsibl write your | where you think it fits best. I le for supplying correct infor name and case number (if I | Be as complete and acc mation. If more space i (nown). Answer every q | asset only once. If an asset fits in more curate as possible. If two married peop s needed, attach a separate sheet to buestion. Other Real Estate You Own or H | le are filing together, both a his form. On the top of any a | are equally |
| 1. Do you | ı own or have any legal or ed | quitable interest in any | residence, building, land, or similar pr | operty? | |
| ✓ | No. Go to Part 2 | | | | |
| | Yes. Where is the property? | | | | |
| 1.1 | Street address, if available, or | other description | t is the property? Check all that apply. Single-family home | the amount of any secu | claims or exemptions. Put tred claims on Schedule D: nims Secured by Property. |
| | | <u> </u> | Ouplex or multi-unit building Condominium or cooperative | Current value of the | Current value of the |
| | | <u> </u> | Manufactured or mobile home | entire property? | portion you own? |
| | Number Street | | and | Describe the nature o | f vour ownership |
| | | <u> </u> | nvestment property iimeshare | interest (such as fee s the entireties, or a life | simple, tenancy by |
| | City State | | Other | | —————————————————————————————————————— |
| | | Who one. | has an interest in the property? Check | | mmunity property |
| | | | Debtor 1 only | | |
| | | <u> </u> | Debtor 2 only | | |
| | | <u> </u> | Debtor 1 and Debtor 2 only | | |
| | | | t least one of the debtors and another | de de un complete de le cel | |
| | | | r information you wish to add about the erty identification number: | ils item, such as local | |
| If you | own or have more than one, li | st here: | | | |
| 4.0 | | | t is the property? Check all that apply. | | claims or exemptions. Put ired claims on <i>Schedule D:</i> |
| 1.2 | Street address, if available, or | other description — | Single-family home | | aims Secured by Property. |
| | | <u> </u> | Ouplex or multi-unit building Condominium or cooperative | Current value of the | Current value of the |
| | | | Manufactured or mobile home | entire property? | portion you own? |
| | Number Street | | and | Describe the nature o | f vour ownership |
| | | | nvestment property iimeshare | interest (such as fee s | simple, tenancy by |
| | City State | | Other | the entireties, or a life | e estate), if Known. |
| | | Who one. | has an interest in the property? Check | | ommunity property |
| | | | Debtor 1 only | Ц | |
| | | <u> </u> | Debtor 2 only | | |
| | | H | Debtor 1 and Debtor 2 only | | |
| | | Ħ <i>⁴</i> | at least one of the debtors and another | | |
| | | | r information you wish to add about the | iis item, such as local | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 11 of 68

| Debtor 1 | Juanita First Name | Middle Name | Braggs Last Name | Case numbe | r (if known) | |
|-------------------------------|---|---|--|------------------|--|--|
| 1.3 | et address, if available, or otl | | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | apply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own? |
| Nur City | nber Street State | Zip Code | Land Investment property Timeshare Other | _ | Describe the nature of interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | [] [| Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | other | Check if this is co (see instructions) | mmunity property |
| | the dollar value of the porve attached for Part 1. Wr | rtion you own for a ite that number he | _ | uding any entrie | s for pages | |
| Do you ov you own t | | equitable interest ou lease a vehicle, a | in any vehicles, whether they are also report it on Schedule G: Executo cycles | - | - | |
| ☐ No ✓ Ye | | | | | | |
| 3.1 | Make Model: Year: | Ford Fusion 2014 | Who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> nims Secured by Property. |
| | Approximate mileage: Other information: | 60000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community | | Current value of the entire property? \$9050.00 | Current value of the portion you own? \$9050.00 |
| 3.2 | Make Model: Year: | | instructions) Who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put irred claims on Schedule D: laims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions) | | Current value of the entire property? | Current value of the portion you own? |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 12 of 68

| | Juanita First Name | Middle Name | Braggs Last Name | Case number | er (if known) | |
|-----|---|-------------|---|--|--|---|
| 3.3 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is communinstructions) | nly rs and another | the amount of any secu | claims or exemptions. Pured claims on Schedule Laims Secured by Property. Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o | | the amount of any secu | claims or exemptions. Pured claims on <i>Schedule Laims Secured by Property</i> . Current value of the portion you own? |
| | | | At least one of the debto Check if this is commu instructions) | | | |
| | | • | r recreational vehicles, othe fishing vessels, snowmobiles, | • | | |
| Exa | mples: Boats, trailers, motors No Yes | • | r recreational vehicles, othe | motorcycle accessori property? Check nly rs and another | Do not deduct secured the amount of any secu | claims or exemptions. Pu ured claims on <i>Schedule L</i> aims Secured by Property. Current value of the portion you own? |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 13 of 68

Debtor 1 Juanita Braggs Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Home Furniture \$500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... **Used Electronics** \$250.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1250.00 for Part 3. Write that number here

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 14 of 68

Braggs Debtor 1 Juanita Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: Chase Bank \$0.00 17.2. Checking account: 17.3. Savings account: \$3600.00 Chase Bank 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 15 of 68

| Deb | tor 1 Juanita First Name | Middle Name | Last Name | Case number (if known) | |
|-----|--|---|-------------------------------|--|-----------|
| 20. | Government and corp | orate bonds and other negotial include personal checks, cashiers' | ole and non-negotiable | | |
| | Non-negotiable instrum | ents are those you cannot transfe | r to someone by signing o | or delivering them. | |
| | Yes. Give specific information about them | Issuer name: | | | |
| | | | | | _ |
| | | | | | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in II | | , thrift savings accounts, | or other pension or profit-sharing plans | |
| | No | Type of account: | Institution name: | | |
| | Yes. List each account | 401(k) or similar plan: | Employer Pension | | \$4000.00 |
| | separately. | | LITIPIOYEI PETISIOTI | | |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | - | | |
| | | Keogh: | | | |
| | | Additional account: | | | _ |
| | | Additional account: | · | | _ |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | _ |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | _ |
| | | Water: | | | _ |
| | | Rented furniture: | | | _ |
| | | Other: | | | |
| 23. | Annuities (A contract for | or a periodic payment of money to | you, either for life or for a | number of years) | |
| | ✓ No | | | | |
| | Yes | Issuer name and description: | | | |
| | | | | | <u> </u> |
| | | | | | |
| | | | | | _ |
| | | | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 16 of 68

| Debt | or 1 Juanita | Bragg | | _ |
|------|---|--|---|--|
| 24. | First Name Interests in an education | Middle Name Last Na n IRA, in an account in a qualified ABLE | ^{ame} E program, or under a qualified state tuition program. | |
| | 26 U.S.C. §§ 530(b)(1), 53 | | | |
| | No Institution r | name and description. Separately file the rec | cords of any interests.11 U.S.C. § 521(c): | |
| | | | | |
| | | | | |
| 25. | Trusts, equitable or futu exercisable for your ben | | thing listed in line 1), and rights or powers | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| 26. | Patents convrights trac | demarks, trade secrets, and other intell | ectual property | |
| 20. | | n names, websites, proceeds from royalties | | |
| | ✓ No Yes. Describe | | | |
| | Test Bescribe | | | |
| 27. | | d other general intangibles | | |
| | | s, exclusive licenses, cooperative association | on holdings, liquor licenses, professional licenses | |
| | ✓ No Yes. Describe | | | |
| | | | | |
| | | | | |
| Mor | ney or property owed t | o you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or property owed to | o you? | | portion you own? Do not deduct secured |
| | Tax refunds owed to you ✓ No | | Endorst | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you No Yes. Give specific infor about them, inclu | mation uding whether | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you ✓ No ✓ Yes. Give specific infor | mation uding whether the returns | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific infor about them, incluyou already filed | mation uding whether the returns | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you No Yes. Give specific infor about them, incluyou already filed and the tax years Family support Examples: Past due or lum | mation uding whether the returns | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific infor about them, incluyou already filed and the tax years Family support Examples: Past due or lumport No | mation uding whether the returns p sum alimony, spousal support, child sup | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific infor about them, incluyou already filed and the tax years Family support Examples: Past due or lum | mation uding whether the returns p sum alimony, spousal support, child sup | State: Local: port, maintenance, divorce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific infor about them, incluyou already filed and the tax years Family support Examples: Past due or lumport No | mation uding whether the returns p sum alimony, spousal support, child sup | State: Local: port, maintenance, divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific infor about them, incluyou already filed and the tax years Family support Examples: Past due or lumport No | mation uding whether the returns p sum alimony, spousal support, child sup | State: Local: port, maintenance, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific infor about them, incluyou already filed and the tax years Family support Examples: Past due or lumport No | mation uding whether the returns p sum alimony, spousal support, child sup | State: Local: port, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you ✓ No Yes. Give specific infor about them, incluyou already filed and the tax years Family support Examples: Past due or lum ✓ No Yes. Give specific infor | mation uding whether the returns p sum alimony, spousal support, child sup mation | State: Local: port, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you No Yes. Give specific infor about them, incluyou already filed and the tax years Family support Examples: Past due or lump No Yes. Give specific infor Other amounts someone Examples: Unpaid wages, of | mation uding whether the returns p sum alimony, spousal support, child sup mation | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you ✓ No Yes. Give specific infor about them, incluyou already filed and the tax years Family support Examples: Past due or lum ✓ No Yes. Give specific infor Other amounts someone Examples: Unpaid wages, or Social Security by No | mation uding whether the returns p sum alimony, spousal support, child sup mation owes you disability insurance payments, disability ber | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you ✓ No Yes. Give specific infor about them, incluyou already filed and the tax years Family support Examples: Past due or lump ✓ No Yes. Give specific inform Other amounts someone Examples: Unpaid wages, of Social Security by | mation uding whether the returns p sum alimony, spousal support, child sup mation owes you disability insurance payments, disability ber | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 17 of 68

| Deb | tor 1 Juanita | | Braggs | Case number (if known) | |
|------|---|---------------------------|---|---|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance Examples: Health, disabil | | alth savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | Yes. Name the insur of each policy and list | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in propert If you are the beneficiary property because someo No Yes. Describe | of a living trust, expect | someone who has died proceeds from a life insurance polic | y, or are currently entitled to receive | |
| 33. | | | you have filed a lawsuit or made urance claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and uto set off claims No Yes. Describe | unliquidated claims of | fevery nature, including counterd | claims of the debtor and rights | |
| 35. | Any financial assets yo No Yes. Describe | u did not already list | | | |
| 36. | | • | m Part 4, including any entries fo | | \$7600.00 |
| Part | 5: Describe Any Bu | siness-Related Pro | operty You Own or Have an I | nterest In. List any real estate in Pa | nrt 1. |
| 37. | No. Go to Part 6. Yes. Go to line 38. | y legal or equitable in | terest in any business-related pr | operty? | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or | commissions you alr | eady earned | | or exemptions |
| | No Yes. Describe | | | | |
| 39. | Office equipment, furni Examples: Business-relat | | e, modems, printers, copiers, fax ma | achines, rugs, telephones, desks, chairs, ele | ectronic devices |
| | ✓ No Yes. Describe | | | | |
| | | | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 18 of 68

| Deb | tor 1 Juanita | Braggs | Case number (if known) | |
|----------|--------------------------------------|--|-----------------------------|--|
| | First Name | Middle Name Last Name | | |
| 40. | Machinery, fixtures, ed | quipment, supplies you use in business, and tools of your trac | de | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | _ | | | |
| | | | | |
| 41. | Inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | 1001 20001100111 | | | |
| | - | | | |
| 42. | Interests in partnershi | ps or joint ventures | | |
| | ✓ No | | | |
| | | Name of entity: | % of ownership: | |
| | Yes. Give specific information about | | | |
| | them | - | | |
| | | - | <u> </u> | |
| | | | | |
| 43 (| Customer lists mailing | lists, or other compilations | | |
| 10. | | note, or other complications | | |
| | ✓ No | | | |
| | Yes. Do your lists in | clude personally identifiable information (as defined in 11 U.S.C. § | § 101(41A))? | |
| | ☐ No | | | |
| | Yes. Descr | iho | | |
| | les. Desci | DE | | |
| 44. | Any business-related i | property you did not already list | | |
| | - N | | | |
| | ✓ No | | | _ |
| | Yes. Give specific information | | | |
| | information | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 45. A | dd the dollar value of a | II of your entries from Part 5, including any entries for pages | you have attached | |
| | | r here | | |
| <u> </u> | | | | |
| Part | If you own or have an | rm- and Commercial Fishing-Related Property You interest in farmland, list it in Part 1. | Own or Have an Interest In. | |
| 46. | Do you own or have ar | ny legal or equitable interest in any farm- or commercial fish | ing-related property? | |
| | No. Go to Part 7. | | | Current value of the |
| | | | | portion you own? |
| | Yes. Go to line 47. | | | Do not deduct secured claims or exemptions |
| 17 | Farm animals | | | n evenibrions |
| 47. | Examples: Livestock, po | oultry, farm-raised fish | | |
| | | • | | |
| | No No | | | |
| | Yes. Describe | | | |
| | Į. | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 19 of 68

| Debto | or 1 Juanita First Name | | raggs ast Name | Case number (if known) | |
|----------------|----------------------------|--|------------------------|------------------------------|---|
| 48. | | growing or harvested | ast ivanie | | |
| | √ No | | | | |
| | Yes. Descr | ibe | | | |
| | _ | | | | |
| 49. | Farm and fish | ing equipment, implements, machinery, fixture | es, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Descr | ibe | | | |
| | | | | | |
| 50. | Farm and fish | ing supplies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Descr | ibe | | | |
| | | | | | |
| 51. | Any farm- and | commercial fishing-related property you did n | not already list | | |
| | ✓ No Yes. Descr | iha | | | |
| | les. Desci | | | | |
| | | | | Г | |
| | | alue of all of your entries from Part 6, including | | - | |
| > | | | | | |
| | | | | | |
| Part 7 | Describe | All Property You Own or Have an Intere | st in That You Did I | Not List Above | |
| | | ther property of any kind you did not already li | | | |
| ١., | _ | son tickets, country club membership | | | |
| | ✓ No | n acific | | | |
| | Yes. Give s information | | | | |
| | | | | | |
| | | | | | |
| 54. Ad | d the dollar va | alue of all of your entries from Part 7. Write tha | at number here | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |
| Part 8 | List the T | otals of Each Part of this Form | | | |
| 55 P : | art 1: Total re | al estate, line 2 | | • | |
| 33.1 | art i. iotarie | ai estate, iiie 2 | | | |
| 56. p a | art 2 total veh | icles, line 5 | \$9050.00 | _ | |
| 57. Pa | art 3: Total pe | rsonal and household items, line 15 | \$1250.00 | _ | |
| 58. Pa | art 4: Total fina | ancial assets, line 36 | \$7600.00 | _ | |
| 59. P | art 5: Total bu | siness-related property, line 45 | | | |
| 60. P | art 6: Total fa | m- and fishing-related property, line 52 | | _ | |
| 61. P | art 7: Total ot | her property not listed, line 54 | | _ | |
| 62. T c | otal personal _l | property. Add lines 56 through 61 | \$17900.00 | _ | + \$17900.00 |
| | | | | Copy personal property total | , |
| | | | | | \$17900.00 |
| 63. To | tal of all prop | erty on Schedule A/B. Add line 55 + line 62 | | | |

| | | Case 18-07546 | Doc 1 Filed 03 Docui | | Entered 03/3 Page 20 of 68 | 15/18 14:49:04 3 | Desc Main |
|--------------------------|--|--|---|--|--|---|--|
| Fill | in this inforn | nation to identify your case: | | | | | |
| Dek | otor 1 | Juanita First Name | Middle Name | Braggs Last Nan | ne | | |
| | otor 2 ouse, if filing) | First Name | Middle Name | Last Nan | ne | | |
| Uni | ted States Ba | ankruptcy Court for the: North | nern Di | istrict of Illing | | | |
| | se number | | | (Sta | te) | | |
| | , | Form 106C | | | | | Check if this is an amended filing |
| | | C: The Property | You Claim a | s Exen | npt | | 04/16 |
| For stat the tax-und you | each item e a specif amount of exempt re ler a law the r exemption | es, write your name and ca of property you claim as ic dollar amount as exem any applicable statutory stirement funds—may be | se number (if known) sexempt, you must s pt. Alternatively, you limit. Some exempt unlimited in dollar a o a particular dollar e applicable statutory | pecify the may clair ions—sucl mount. Ho amount ar | amount of the ex n the full fair mar h as those for hea owever, if you clai | emption you claim. ket value of the pro lth aids, rights to re m an exemption of | One way of doing so is to perty being exempted up to ceive certain benefits, and 100% of fair market value ined to exceed that amount, |
| 1. | | of exemptions are you claim | - | | | | |
| | | re claiming state and federal | | | S.C. § 522(b)(3) | | |
| | _ | re claiming federal exemption | | | | | |
| 2. | For any pr | operty you list on <i>Schedule A</i> | N/B that you claim as ex | xempt, fill in | the information bel | ow. | |
| | | ription of the property and nedule A/B that lists this | Current value of the portion you own Copy the value from Schedule A/B | | the exemption you or one box for each exe | · | fic laws that allow exemption |
| | Brief | | | | | | 735 ILCS 5/12-1001(b) |

\$0.00

\$3,600.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

 $\overline{\mathbf{A}}$

No Yes

description:

Line from Schedule A/B:

description:

Line from Schedule A/B:

Bank

Brief

Checking account,

Savings account, Chase

Are you claiming a homestead exemption of more than \$160,375?

Chase Bank

100% of fair market value, up to any

\$3,250.00

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

735 ILCS 5/12-1001(b)

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 21 of 68

Debtor 1 Juanita Braggs Case number (if known)
First Name Middle Name Last Name

| Sch Brief | y the value from edule A/B \$9,050.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |
|---|---|--|---|
| description: Ford Fusion, 2014 Line from Schedule A/B: 03 Brief description: Used Clothing Line from Schedule A/B: 11 Brief description: Used Home Furniture Line from Schedule A/B: 06 Brief description: Used Electronics | \$9,050.00 | 100% of fair market value, up to any | |
| Line from Schedule A/B: 03 Brief description: Used Clothing Line from Schedule A/B: 11 Brief description: Used Home Furniture Line from Schedule A/B: 06 Brief description: Used Electronics | | | _ |
| description: Used Clothing Line from Schedule A/B: 11 Brief description: Used Home Furniture Line from Schedule A/B: 06 Brief description: Used Electronics | | applicable statutory littlit | |
| Used Clothing Line from Schedule A/B: 11 Brief description: Used Home Furniture Line from Schedule A/B: 06 Brief description: Used Electronics | | | 735 ILCS 5/12-1001(a) |
| Line from Schedule A/B: 11 Brief description: Used Home Furniture Line from Schedule A/B: 06 Brief description: Used Electronics | \$500.00 | \$500.00 | |
| description: Used Home Furniture Line from Schedule A/B: 06 Brief description: Used Electronics | | 100% of fair market value, up to any applicable statutory limit | _ |
| Line from Schedule A/B: 06 Brief description: Used Electronics | \$500.00 | Ø500.00 | 735 ILCS 5/12-1001(b) |
| Schedule A/B: 06 Brief description: Used Electronics | | \$500.00 | _ |
| description: Used Electronics | | 100% of fair market value, up to any applicable statutory limit | |
| Used Electronics | * 0.50.00 | _ | 735 ILCS 5/12-1001(b) |
| | \$250.00 | \$250.00 | |
| Schedule A/B: 07 | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief | | | 735 ILCS 5/12-1006 |
| | \$4,000.00 | \$4,000.00 | |
| 401(k) or similar plan, Employer Pension | | 100% of fair market value, up to any | - |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 22 of 68

| | | | DC | rage 22 or | 00 | | |
|-----------------|--------------------------------------|--|---|--|---|---|-----------------------------------|
| Fill in | this infor | mation to identify your cas | se: | | | | |
| Debto | or 1 | Juanita | | Braggs | | | |
| | _ | First Name | Middle Name | Last Name | | | |
| Debto (Spous | or 2 e, if filing) | First Name | Middle Name | Last Name | | | |
| United | d States F | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Office | J Olales L | director Court for the. | Northern | (State) | | | |
| Case (If know | number ⁄n) | | | | | | |
| Offi | icial | Form 106D | | | | | Check if this is an mended filing |
| Sch | nedu | le D: Credito | ors Who Ha | ve Claims Secur | ed by Prop | erty | 12/15 |
| Be as more s | complete space is | e and accurate as possib | le. If two married peopl | e are filing together, both are eq nber the entries, and attach it to | ually responsible for s | upplying correct infor | |
| 1. | Oo any o | reditors have claims se | ecured by your proper | ty? | | | |
| | No. 0 | Check this box and subm | nit this form to the court | with your other schedules. You ha | ve nothing else to rep | ort on this form. | |
| | ✓ Yes. | Fill in all of the information | n below. | | | | |
| Part 1 | 1: List | All Secured Claims | | | | | |
| 2. | separate | ly for each claim. If more th | nan one creditor has a par | cured claim, list the creditor ticular claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | TUSTIN City Who ow Deb Deb At Id and | CA 92780 State ZIP Code res the debt? Check one. restor 1 only restor 2 only restor 1 and Debtor 2 only restor 6 the debtors another reck if this claim relates a community debt bt was 4/2017 | 2014 Ford Fusion As of the date you file Contingent Unliquidated Disputed Nature of lien. Check | made (such as mortgage or secured as tax lien, mechanic's lien) n a lawsuit ight to offset) | \$15,084.00 | \$9,050.00 | <u>\$6,034.00</u> |
| | | Add the dollar value of v | our entries in Column A | A on this page. Write that number | \$15,084.00 | | |

here:

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 23 of 68

| Fill i | n this infori | mation to identify your c | ase: | | | | | |
|---|---|---|---|--|--|--|--|---|
| Deb | tor 1 | Juanita First Name | Middle None | Braggs | | | | |
| Dob | tor 2 | First Name | Middle Name | Last Name | | | | |
| | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Unit | ed States B | ankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case (If knd | e number own) | | | | | | | |
| <u> </u> | | orm 106E/F | | | | Che | eck if this is an | n amended filing |
| | | | ditors Who | Have Unse | cured Claims | | | 12/15 |
| other Form clain the e know | r party to a 106A/B) a ns that are entries in the n). | any executory contracts and on <i>Schedule G: Exe</i> Ilisted in <i>Schedule D: C</i> he boxes on the left. At | s or unexpired leases that cutory Contracts and Une Creditors Who Hold Claims | could result in a clain expired Leases (Official Secured by Property. | ms and Part 2 for creditors wit n. Also list executory contracts Form 106G). Do not include a If more space is needed, copy top of any additional pages, v | on <i>Sched</i> ny creditor the Part y | ule A/B: Prop rs with partia ou need, fill i | perty (Official ally secured it out, number |
| 1. | - | reditors have priority un Go to Part 2. | secured claims against y | ou? | | | | |
| 2. | listed, ider As much a Continuati | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priorit | ty and nonpriority amour ding to the creditor's nan particular claim, list the o | | both priority | y and nonprio | rity amounts. |
| | | | | | | Total claim | Priority amount | Nonpriority amount |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 24 of 68

| Debte | or 1 | Juanita First Name Middle Name | Braggs Last Name | Case number (if known) | |
|--------|--------------|---|---------------------|--|-------------------|
| Part : | 2. | List All of Your NONPRIORITY Unsecured C | | | |
| 3. [| | any creditors have nonpriority unsecured claims ag No. You have nothing to report in this part. Submit Yes. | ainst you? | ne court with your other schedules. | |
| t I | unse If m | ecured claim, list the creditor separately for each claim. F | or each claim | er of the creditor who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill ou | cluded in Part 1. |
| | | | | | Total claim |
| 4.1 | | FNI, INC. | | Last 4 digits of account number 6226 | \$240.00 |
| | | onpriority Creditor's Name O Box 3517 | | When was the debt incurred? 10/2017 | |
| | Νι | umber Street | | As of the date you file, the claim is: Check all that apply. | |
| | _ | | | Contingent | |
| | BI Ci | loomingtonIllinois61702ityStateZip Coc | <u> </u> | Unliquidated | |
| | | ho incurred the debt? Check one. | | Disputed | |
| | ~ | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | Student loans | |
| | F | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or | |
| | Ē | At least one of the debtors and another | | divorce that you did not report as priority claims | |
| | Ē | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls | the claim subject to offset? | | ✓ 001 Collection; Collecting for | |
| | ~ | ? No | | ORIGINAL CREDITOR: AT T U- Other. Specify VERSE | |
| | | Yes | | · · · · · · · · · · · · · · · · · · · | |
| 4.2 | CI | BNA | | Last 4 digits of account number 2681 | \$784.00 |
| | | onpriority Creditor's Name o Box 6497 | | When was the debt incurred? 4/2015 | |
| | _ | umber Street | | As of the data you file the plains in Charle all that apply | |
| | _ | | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Si | oux Falls South Dakota 57117 | | Unliquidated | |
| | Ci | ity State Zip Coc 'ho incurred the debt? Check one. | le | Disputed | |
| | Ÿ | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Ē | Debtor 2 only | | Student loans | |
| | F | Debtor 1 and Debtor 2 only | | 블 | |
| | F | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | F | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ∟ Is | the claim subject to offset? | | Other. Specify CreditCard | |
| | V | - | | | |
| | Ē | Yes | | | |
| 4.3 | CI | HASE CARD | | Last 4 digits of account number 2375 | \$507.00 |
| | | onpriority Creditor's Name ANK ONE CARD SERV 2500 WESTFIELD DRI | | When was the debt incurred? 6/2015 | |
| | | umber Street | | | |
| | _ | | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | EL | _GIN Illinois 60124 | | Unliquidated | |
| | | ity State Zip Coc 'ho incurred the debt? Check one. | le | Disputed | |
| | Ÿ | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Ē | Debtor 2 only | | Student loans | |
| | Ė | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or | |
| | F | At least one of the debtors and another | | divorce that you did not report as priority claims | |
| | F | ☐ Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ∟ Is | the claim subject to offset? | | Other. Specify CreditCard | |
| | V | No | | | |
| | Ē | Yes | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 25 of 68

Debtor 1 Juanita Braggs Case number (if known) Last Name

| Part 2 | art 2: Your NONPRIORITY Unsecured Claims - Continuation Page | | | | | |
|--------|---|--|-------------|--|--|--|
| | After listing any entries on this page, number them beginning wit | h 4.5, followed by 4.6, and so forth. | Total claim | | | |
| 4.4 | COMENITY BANK/CARSONS Nonpriority Creditor's Name 1314 PINELOG ROAD Number Street | Last 4 digits of account number 1325 When was the debt incurred? 8/2015 As of the date you file, the claim is: Check all that apply. | \$705.00 | | | |
| | AIKEN South Carolina 29803 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard | | | | |
| 4.5 | COMENITYBANK/VICTORIA Nonpriority Creditor's Name 220 W SCHROCK RD Number Street WESTERVILLE Ohio 43081 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 6440 When was the debt incurred? 9/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard | \$1,137.00 | | | |
| 4.6 | CONVERGENT OUTSOURCING Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 Number Street Houston Texas 77043 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No | Last 4 digits of account number | \$864.00 | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 26 of 68

Debtor 1 Juanita Braggs Case number (if known)
First Name Middle Name Last Name

| Part 2 | Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page | | | | | |
|--------|--|---|-------------------|--|--|--|
| | After listing any entries on this page, number them beginning wi | ith 4.5, followed by 4.6, and so forth. | Total claim | | | |
| 4.7 | DISCOVER FIN SVCS LLC | - Last 4 digits of account number 4105 | \$979.00 | | | |
| | Nonpriority Creditor's Name PO BOX 15316 | When was the debt incurred? 6/2016 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. Contingent | | | | |
| | WILMINGTON Delaware 19850 | - Unliquidated | | | | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts | | | | |
| | Is the claim subject to offset? | Other. Specify CreditCard | | | | |
| | ✓ No | | | | | |
| 4.0 | Yes | | #11.004.00 | | | |
| 4.8 | FIFTH THIRD BANK Nonpriority Creditor's Name | - Last 4 digits of account number 9710 | \$11,034.00 | | | |
| | 38 FOUNTAIN SQUARE PLZ Number Street | When was the debt incurred? 12/2014 | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | CINCINNATI Ohio 45263 | Unliquidated | | | | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Check if this claim relates to a community debt | Other. Specify Unsecured Car | | | | |
| | Is the claim subject to offset? | _ | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.9 | Hertz Rent A Car Nonpriority Creditor's Name | Last 4 digits of account number | \$1,000.00 | | | |
| | 629 West Madison Street Number Street | When was the debt incurred?n/a | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | - | - Contingent | | | | |
| | Oak Park Illinois 60302 | Unliquidated | | | | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts Other. Specify Rental Fees | | | | |
| | Is the claim subject to offset? | | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 27 of 68

Debtor 1 Juanita Braggs Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** John H. Stroger, Jr. Hospital of Cook County 4.10 \$17,000.00 - Last 4 digits of account number Nonpriority Creditor's Name PO Box 70121 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60673 Illinois Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify _ Medical Is the claim subject to offset? No ◪ ☐ Yes KAY JEWELERS \$585.00 Last 4 digits of account number ___ 0487 Nonpriority Creditor's Name When was the debt incurred? 11/2012 1903 Southlake Mall Street Number As of the date you file, the claim is: Check all that apply. Contingent Merrillville Indiana 46410 Unliquidated Citv State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.12 MCYDSNB \$724.00 Last 4 digits of account number 1251 Nonpriority Creditor's Name When was the debt incurred? 9111 DUKE BLVD Number As of the date you file, the claim is: Check all that apply. Contingent Ohio 45040 MASON Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

✓ No Yes

Is the claim subject to offset?

Other. Specify _

CreditCard

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document

Page 28 of 68 Braggs Case number (if known) Debtor 1 Juanita Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** NORDSTROM/TD BANK USA 4.13 \$4,442.00 Last 4 digits of account number 2362 Nonpriority Creditor's Name PO BOX 6555 When was the debt incurred? 1/2016 Number Street As of the date you file the claim is: Check all that apply

| | As of the date you file, the claim is: Check all that apply. | | | | | |
|---|---|--------|--|--|--|--|
| FNOLEWOOD Colored 90155 | Contingent | | | | | |
| ENGLEWOOD Colorado 80155 City State Zip Code | Unliquidated | | | | | |
| Who incurred the debt? Check one. | Disputed | | | | | |
| Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | |
| Debtor 2 only | Student loans | | | | | |
| Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | | |
| At least one of the debtors and another | divorce that you did not report as priority claims | | | | | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Is the claim subject to offset? | Other. Specify CreditCard | | | | | |
| ✓ No ☐ Yes | | | | | | |
| 4.14 RECEIVABLES PERFORMANC | Last 4 digita of account number 5592 \$ | 218.00 | | | | |
| Nonpriority Creditor's Name | Last 4 digits of account number | | | | | |
| 20816 44th Ave W | When was the debt incurred? 11/2017 | | | | | |
| Number Street | As of the date you file, the claim is: Check all that apply. | | | | | |
| | Contingent | | | | | |
| Lynnwood Washington 98036 | Unliquidated | | | | | |
| City State Zip Code | Disputed | | | | | |
| Who incurred the debt? Check one. Debtor 1 only | | | | | | |
| <u>Ľ</u> | Type of NONPRIORITY unsecured claim: | | | | | |
| Debtor 2 only | Student loans | | | | | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Is the claim subject to offset? | OOA Oolle all and Oolle all and for | | | | | |
| | Other. Specify ORIGINAL CREDITOR: DIRECTV | | | | | |
| | | | | | | |
| Yes | | | | | | |
| 4.15 SYNCB/OLD NAVY | Last 4 digits of account number 4924 | 193.00 | | | | |
| Nonpriority Creditor's Name | When was the debt incurred? 6/2017 | | | | | |
| Po Box 530942 Number Street | When was the dest incurred: 0/2011 | | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | | | |
| | Contingent | | | | | |
| Atlanta Georgia 30353 City State Zip Code | —— Unliquidated | | | | | |
| Who incurred the debt? Check one. | Disputed | | | | | |
| Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | |
| Debtor 2 only | 200 | | | | | |
| <u> </u> | Student loans | | | | | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Is the claim subject to offset? | Other. Specify CreditCard | | | | | |
| ✓ No | _ | | | | | |
| Yes | | | | | | |
| L 100 | | | | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 29 of 68

Braggs Debtor 1 Juanita Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** SYNCB/VALUE CITY FURNI 4.16 \$861.00 Last 4 digits of account number Nonpriority Creditor's Name 950 FORRER BLVD When was the debt incurred? 4/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **KETTERING** 45420 Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.17 SYNCB/WALMART \$482.00 8598 Last 4 digits of account number Nonpriority Creditor's Name Po Box 530927 When was the debt incurred? 6/2015 Number As of the date you file, the claim is: Check all that apply. Contingent Atlanta Georgia 30353 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? CreditCard **✓** No Yes 4.18 TD BANK USA/TARGETCRED \$2,259.00 Last 4 digits of account number 0667 Nonpriority Creditor's Name When was the debt incurred? 7/2015 PO BOX 673 Number Street As of the date you file, the claim is: Check all that apply. Contingent MINNEAPOLIS Minnesota 55440 Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

✓ No ✓ Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

debts

Other. Specify

CreditCard

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 30 of 68

Debtor 1 Juanita Braggs Case number (if known)
First Name Middle Name Last Name

| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | | |
|--------------------------|---|-------|-------------------------------------|-------------------|
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for s | tatistical reporting purposes only. | . 28 U.S.C. §159. |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$44,014.00 | |
| | 6i. Total. Add lines 6f through 6i. | 6i. | \$44,014.00 | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 31 of 68

| Debtor 1 Juanita Braggs First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) | | | asc. | mation to identity your c | |
|---|------------|----------------------|-------------|---------------------------|---------------------|
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) | | Braggs | | Juanita | Debtor 1 |
| (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number | | Last Name | Middle Name | First Name | |
| United States Bankruptcy Court for the: Northern | | | | | |
| Case number | | Last Name | Middle Name | First Name | (Spouse, if filing) |
| Case number | | District of Illinois | Northern | Bankruptcy Court for the: | United States E |
| | | (State) | | | |
| (II NIOWI) | | | | | |
| | <u> </u> | | | | (II KIIOWII) |
| Official Form 106G | Check amen | | ì | Form 106G | Official |

an

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or comp | pany with whom you have | the contract or lease | State what the contract or lease is for |
|-----|-----------------|-------------------------|-----------------------|---|
| 2.1 | The Oaks of Wil | low Hills Apartments | | Residential Lease, Debtor is Lessee, |
| | 8712 S. 87th Te | errace | | Housing Lease |
| | Number | Street | | |
| | Justice | Illinois | 60458 | |
| | City | State | Zip Code | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 32 of 68

| | | D | ocument rage | C 32 01 00 | |
|-----------------------------|--|---------------------------------|-------------------------------|---|------------------------------------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Juanita First Name | Middle Name | Braggs Last Name | | |
| Debtor 2 (Spouse, if fil | | Middle Name | Last Name | | |
| United Sta | ites Bankruptcy Court for the | Northern | District of Illinois (State) | | |
| Case num | ber | | (State) | | |
| | | | | | Check if this is an amended filing |
| Offici | al Form 106H | | | | |
| Sched | lule H: Your Co | debtors | | | 12/15 |
| 1. Do yo | nswer every question. The have any codebtors? (If your No Yes The have your the last 8 years, have you | you are filing a joint case, do | o not list either spouse as a | ? (Community property states and territories include | · |
| | , Louisiana, Nevada, New Me No. Go to line 3. Yes. Did your spouse, form No | | | | |
| | - | ity state or territory did yo | u live? | Fill in the name and current address of that per | son. |
| | Name of your spouse, | former spouse, or legal equ | iivalent | | |
| | Number Street | | | | |
| | City | State | Zip Co | ode | |
| | • | - | - | rif your spouse is filing with you. List the person u have listed the creditor on Schedule D (Officia | |

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 33 of 68

| Debtor 1 Juanita | | | | 9 | | | |
|--|---|--|--------------------------------|---------------|--------------------------------|---|-------------------|
| First Name | Fill in this information to ider | ntify your case: | | | | | |
| First Name | Debtor 1 Juanita | | Braggs | | | | |
| Debtor 2 Gepouse, if filing) First Name Middle Name Last Name District of Illinois A supplement showing post-petition chapte expenses as of the following date: | | Middle Name | | ne | — Che | ock if this is: | |
| United States Bankruptcy Court for the: Case number (if known). District of Illinois (Slate) | | | | | | | |
| Schedule I: Your Income 1/2 | (Spouse, if filing) First Name | Middle Name | Last Nar | ne | | Ğ | |
| Case number (If known) Official Form 106l Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and cas number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation may include student or homemaker, if it applies. Debtor 1 Debtor 2 Employed Debtor 2 Employed Not Empl | United States Bankruptcy Cour | t for Northern | District of Illino | ois | | | |
| Official Form 106l Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and cas number (iff known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employes. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's name Employer's address Occupation Employer's address USPS Employer's address VERPOYED VE | | | (Sta | te) | | oxportion do of the following date | |
| Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and cas number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's name Employer's address USPS 230 Northgate St Number Street Number Street How long employed 4 years 2 months | | | | | _ | MM / DD / YYYY | |
| Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and cas number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's name Employer's address Employer's address USPS 230 Northgate St Number Street Number Street Number Street How long employed 4 years 2 months | Official Form 106 | SI | | | | | |
| responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and cas number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's name Employer's address USPS Employer's address 230 Northgate St Number Street | | <u> </u> | | | | | 12/ ⁻ |
| 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Debtor 2 Employed Not Employed Not Employed USPS Employer's name Employer's name Employer's address USPS 230 Northgate St Number Street Number Street Number Street How long employed 4 years 2 months | responsible for supplying co information about your spou spouse. If more space is need number (if known). Answer | rrect information. If you ard se. If you are separated an eded, attach a separate she every question. | e married and d your spouse | not filing jo | intly, and you with you, do | r spouse is living with you, in not include information abou | iclude ut your |
| If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's name Employer's name Employer's name Employer's name Employer's name Employer's address USPS 230 Northgate St Number Street Number Street Number Street How long employed How long employed | | Шенс | Debtor 1 | | | Dehtor 2 | |
| If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Description Employer's name stemployer's address Employer's address Description Lake Forest Illinois 60045 City State Zip Code How long employed A years 2 months | | | Debtor 1 | | | Debtor 2 | |
| attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation to homemaker, if it applies. Employer's name Employer's address Occupation may include student or homemaker, if it applies. Lake Forest Illinois 60045 City State Zip Code How long employed Not Employed Not Employed Not Employed Not Employed Not Employed Lake Forest Illinois 60045 City State Zip Code 4 years 2 months | | Employment status | Employe | d | | Employed | |
| employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Employer's address 230 Northgate St Number Street Number Street Lake Forest Illinois 60045 City State Zip Code Total State Zip Code A years 2 months | | υ, | Not Emp | loyed | | Not Employed | |
| Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Employer's address 230 Northgate St Number Street Number Street Lake Forest Illinois 60045 City State Zip Code 4 years 2 months How long employed | | 0 | _ | | | _ | |
| self-employed work. Occupation may include student or homemaker, if it applies. Employer's address 230 Northgate St Number Street Number Street Lake Forest Illinois 60045 City State Zip Code 4 years 2 months How long employed | | · | | | | | |
| Occupation may include student or homemaker, if it applies. Lake Forest Illinois 60045 City State Zip Code Light State Zip Code Light State Zip Code Light City City State Zip Code Light City Ci | | r Employer's name | USPS | | | <u> </u> | |
| or homemaker, if it applies. Lake Forest Illinois 60045 City State Zip Code City State Zip Code 4 years 2 months | | | | | | | |
| City State Zip Code City State Zip Code How long employed 4 years 2 months | , , | GIIL | Number Street | i | | Number Street | |
| City State Zip Code City State Zip Code How long employed 4 years 2 months | | | | | | | |
| How long employed 4 years 2 months | | | Lake Forest | Illinois | 60045 | | |
| now long employed | | | City | State | Zip Code | City State | Zip Code |
| | | | 4 years 2 mg | onths | | | |
| Part 2: Give Details About Monthly Income | Part 2: Give Details Abo | ut Monthly Income | | | | | |
| | If you or your non-filing spouse | have more than one employer | , combine the inf | ormation for | all employers fo | or that person on the lines below. | If you need |
| spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more change, attach a concepts that the form | тюге ѕрасе, апаст а ѕерагаю | e sneet to this form. | | For | Debtor 1 | For Debtor 2 or non-filing spouse | |
| If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or | | | | 2. | \$4,535.64 | | |
| If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would For Debtor 1 Substitute 1 Substitute 1 Substitute 2 Substitute 2 Substitute 3 Substitute 3 Substitute 3 Substitute 3 Substitute 3 Substitute 4 Substitute 3 Substitute 3 Substitute 3 Substitute 4 Substitute 3 Substitute 4 Substitute 3 Substitute 4 Substitute 3 Substitute 4 Substi | 3. Estimate and list monthly | overtime pay. | 3 | 3. | + \$0.00 | | |
| If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse | I . | | | - | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 34 of 68

| Debtor 1 Juanita First Name Middl | Braggs le Name Last Nam | 10 | Case number | (if | |
|--|--|-----------|------------------------|-----------------------------------|---|
| THSC NAME WHOLE | e name Last main | <u> </u> | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | → | 4. | \$4,535.64 | | |
| 5. List all payroll deductions: | | | | | |
| 5a. Tax, Medicare, and Social Security de | eductions | 5a. | \$1,109.29 | | |
| 5b. Mandatory contributions for retireme | nt plans | 5b. | \$0.00 | | |
| 5c. Voluntary contributions for retiremen | t plans | 5c. | \$173.94 | | |
| 5d. Required repayments of retirement fu | • | 5d. | \$0.00 | | |
| 5e. Insurance | | 5e. | \$0.00 | | |
| 5f. Domestic support obligations | | 5f. | \$0.00 | | |
| 5g. Union dues | | 5g. | \$51.46 | | |
| 5h. Other deductions. Specify: Healthcare | | 5h. + | \$105.60 + | | |
| 6. Add the payroll deductions. Add lines 5a + +5h. | | 6. | \$1,440.29 | | |
| 7. Calculate total monthly take-home pay. S | Subtract line 6 from line 4. | 7. | \$3,095.34 | | |
| 8. List all other income regularly received: | | | | | |
| 8a. Net income from rental property and business, profession, or farm | from operating a | | | | |
| Attach a statement for each property and gross receipts, ordinary and necessary by the total monthly net income. | | 8a. | \$0.00 | | |
| 8b. Interest and dividends | | 8b. | \$0.00 | | |
| 8c. Family support payments that you, a dependent regularly receive | non-filing spouse, or a | | | | |
| Include alimony, spousal support, child sidiorce settlement, and property settlement | | 8c. | \$0.00 | | |
| 8d. Unemployment compensation | | 8d. | \$0.00 | - | |
| 8e. Social Security | | 8e. | \$0.00 | | |
| 8f. Other government assistance that you Include cash assistance and the value (if cash assistance that you receive, such as under the Supplemental Nutrition Assistan housing subsidies Specify: | known) of any non- food stamps (benefits | 8f. | \$0.00 | | |
| 8g. Pension or retirement income | | 8g. | \$0.00 | | |
| 8h. Other monthly income. Specify: | | 8h. + | \$0.00 + | | |
| 9. Add all other income Add lines 8a + 8b + 8 | <u> </u> | 9. | \$0.00 | | |
| 10. Calculate monthly income. Add line 7 + lin Add the entries in line 10 for Debtor 1 and D | | 10. | \$3,095.34 + | | = \$3,095.34 |
| State all other regular contributions to t Include contributions from an unmarried par friends or relatives. Do not include any amounts already included. | he expenses that you list in the there, members of your househ | old, your | dependents, your roomm | | |
| Specify: | | | | | 11. + \$0.00 |
| 12. Add the amount in the last column of lin Write that amount on the Summary of Scheo | | | | | 12. \$3,095.34 Combined monthly income |
| 13. Do you expect an increase or decrease v | within the year after you file | this form | 1? | | o.iiiy iiiooiile |
| Yes. Explain: | | | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 35 of 68

| | | Docu | ment Page 35 of 68 | 3 | |
|------------------------------------|-------------------------------|---|---|-------------------|---|
| Fill in this inform | mation to identify | your case: | | | |
| Debtor 1 | Juanita First Name | Middle Name | Braggs Last Name | Check if this is: | |
| Debtor 2 | | | | An amended fili | 20 |
| (Spouse, if filing) | First Name | Middle Name | Last Name | 브 | |
| United States B | ankruptcy Court t | or the: Northern | District of Illinois | | howing post-petition chapter 13 the following date: |
| Case number | | | (State) | | |
| (If known) | | | | MM / DD / YYYY | · |
| Official | Form 10 | 6J | | | |
| - | | — Expenses | | | 12/15 |
| information. If I | | is possible. If two married people a seded, attach another sheet to this on. | | | |
| Part 1: Desc | cribe Your Ho | ısehold | | | |
| 1. Is this a join | nt case? | | | | |
| ✓ No. Go | to line 2 | | | | |
| Yes. Do | es Debtor 2 live | in a separate household? | | | |
| | No | | | | |
| - | Yes. Debtor 2 | must file Official Forms 106J-2, <i>Exper</i> | nses for Separate Household of Debt | or 2. | |
| 2. Do vou have | dependents? | □ No | | | |
| Do not list D Debtor 2. | • | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | | *************************************** | Child | 5 years | No. |
| | | | | | Yes. |
| expenses of | enses include people other | No | | | |
| than yourself and dependents | • | Yes | | | |
| Part 2: Estir | nate Your Onເ | joing Monthly Expenses | | | |
| | f a date after th | your bankruptcy filing date unless y e bankruptcy is filed. If this is a sup | | | |
| | • | n non-cash government assistance uded it on Schedule I: Your Income | - | | Your expenses |
| | or home owners | ship expenses for your residence. In t. 4. | nclude first mortgage payments and | | \$1,000.00 |
| If not incl | uded in line 4: | | | | |

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 36 of 68

Debtor 1 Juanita Braggs Case number (if known) Last Name

| i ilst ivaire iviidde ivaire Last ivaire | | |
|---|------------|------------------|
| | | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$100.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$35.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$120.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 7. | \$450.00 |
| 8. Childcare and children's education costs | 8. | \$200.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$145.00 |
| 10. Personal care products and services | 10. | \$115.00 |
| 11. Medical and dental expenses | 11. | \$105.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | 12. | \$300.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a | \$0.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$175.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16 | \$0.00 |
| 17. Installment or lease payments: | 10 | |
| 17a. Car payments for Vehicle 1 | 17a | \$345.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19.Other payments you make to support others who do not live with you. | | |
| Specify: | 19. | \$0.00 |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property | 200 | \$0.00 |
| 20b. Real estate taxes. | 20a 20b | \$0.00 \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20b | |
| 20d. Maintenance, repair, and upkeep expenses. | 20c | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20d | \$0.00 |
| 255. Tomos a accordant of contactinium acco | 20e | \$0.00 |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 37 of 68

| Debtor 1 Juanita | | Braggs | Case number (if known) | | |
|-------------------------------|---|-----------------------------|------------------------|-----|-------------|
| First Name | Middle Name | Last Name | | | |
| 21. Other. Specify: | | | | 21 | \$0.00 |
| 22. Calculate your monthly e | xpenses. | | | | \$3,090.00 |
| 22a. Add lines 4 through 21 | | | | | \$0.00 |
| 22b. Copy line 22 (monthly | expenses for Debtor 2), if any | , from Official Form 106J-2 | | | \$3,090.00 |
| 22c. Add line 22a and 22b. | The result is your monthly exp | enses. | | 22. | |
| 23. Calculate your monthly ne | et income. | | | | |
| 23a. Copy line 12 (your com | bined monthly income) from | Schedule I. | | 23a | \$3,095.34 |
| 23b. Copy your monthly exp | penses from line 22 above. | | | 23b | \$3,090.00 |
| | expenses from your monthly i | ncome. | | | \$5.34 |
| The result is your mon | thly net income. | | | 23c | |
| | t to finish paying for your car ase or decrease because of a r | oan within the year or do y | ou expect your | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 38 of 68

| Fill in this infor | mation to identify your ca | ase: | | |
|---------------------|----------------------------|-------------|----------------------|--|
| Debtor 1 | Juanita | | Braggs | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number | | | | |
| (If known) | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Pai | t 1: Sign Below | |
|-----|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? |
| | ☑ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Juanita Braggs | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 3/15/2018 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 39 of 68

| Fill in this info | ormation to identify your c | ase: | | | | | |
|---------------------------------|--|--|---|------------------------------------|-------------|-----------------|----------------------------|
| Debtor 1 | Juanita | | Braggs | | | | |
| Dobtor | First Name | Middle Na | ame Last Nam | ie | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Na | ame Last Nam | ne | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illino | ois | | | |
| Case number | | | (Sta | ie) | | | |
| (If known) | | | | | | | Check if this is a |
| Official | Form 107 | | | | | | amended filing |
| Stateme | ent of Financia | l Affairs fo | r Individuals | Filing for | Bankrı | uptcv | 04/1 |
| Be as complinformation. | ete and accurate as po If more space is neede nown). Answer every qu | ssible. If two mand, attach a sepanalestion. | rried people are filing rate sheet to this form | together, both a. On the top of | are equally | responsible for | |
| Part 1: Giv | ve Details About Your | Marital Status a | nd Where You Lived | Before | | | |
| 1. What i | s your current marital sta | itus? | | | | | |
| м | arried | | | | | | |
| ✓ No | ot married | | | | | | |
| 2. During | the last 3 years, have yo | u lived anywhere | other than where you li | ve now? | | | |
| | o es. List all of the places yo ebtor 1: | u lived in the last (| B years. Do not include Dates Debtor 1 lived there | where you live no | ow. | | Dates Debtor 2 lived there |
| | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | | | | L Same as | Debtor 1 | | Game as Deptor 1 |
| | 0409 Menard umber Street | | From <u>04/2015</u> | Number Stree | et | | From |
| AF | PT 112 | | To <u>06/2017</u> | | | | To |
| O: Ci | ak Lawn Illinois ty State | 60453 Zip Code | | City | State | Zip Code | |
| | iy State | Zip Code | | Same as | | Zip Code | Same as Debtor 1 |
| | | | | Ы | | | ш |
| Nu | umber Street | | From | Number Stree | et | | From |
| | | | То | | | | To |
| Ci | ty State | Zip Code | | City | State | Zip Code | |
| | | | | - | | | |
| and territ | he last 8 years, did you e ories include Arizona, Califo . Make sure you fill out So | mia, Idaho, Louisia | na, Nevada, New Mexico | , Puerto Rico, Tex | | - ' | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 40 of 68

Debtor 1 Juanita Braggs Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, $\overline{\mathbf{A}}$ Wages, \$8191.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$50178.00 For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$50000.00 For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2017 YYYY For the calendar year before that: (January 1 to December 31, 2016

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 41 of 68

Debtor 1 Juanita Braggs Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment State City Suppliers or Zip Code vendors

Other

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 42 of 68

| 1 | Juanita | | | | iggs | Case number | (if known) |
|----------|---------------------------------------|--|---|---|--|---|--|
| | First Name | | Middle Name | Las | t Name | | |
| rp er | ders include your orations of whic | relatives; a h you are a for a busin | ny general partners n officer, director, p ess you operate as | s; relatives of any operson in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing odomestic support obligations, |
|] | No | | | | | | |
| 7 | Yes. List all pay | yments to a | an insider. | Dates of | Total amount | Amountwou | December this normant |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Braggs, Juanita | | | 03/2018 | \$2000.00 | \$0.00 | Familial Support |
| | Insider's Name | | _ | | | | |
| | 4530 S. Lamon | | | | | | |
| • | Number Street | | | | | | |
| | Chicago | Illinois | 60638 | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| ✓ | de payments or No | _ | ranteed or cosigne t benefited an ins | | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| · | Number Street | | | | | | |
| • | | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 43 of 68

Debtor 1 Juanita Braggs Case number (if known) First Name Middle Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code

Property was attached, seized, or levied.

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 44 of 68

| Debtor | 1 Juanita | Bragg | gs Case numb | oer (if known) | |
|----------|---|--------------------------|-----------------------------------|--------------------------------|--------------------|
| | First Name Middle | Name Last N | lame | | |
| | Vithin 90 days before you filed for bank accounts or refuse to make a payment | | | stitution, set off any amour | nts from your |
| | No | | | | |
| L | Yes. Fill in the details. | | | | |
| | | Describe | the action the creditor took | Date action was taken | Amount |
| | Creditor's Name | | | | |
| | Number Street | | | | |
| | | Last 4 dig | its of account number: XXXX- | | |
| | City State Zip | Code | | | |
| | /ithin 1 year before you filed for bankru ppointed receiver, a custodian, or ano | | roperty in the possession of an a | ssignee for the benefit of c | reditors, a court- |
| <u> </u> | No No | | | | |
| L | Yes | | | | |
| Part 5: | List Certain Gifts and Contribut | ions | | | |
| 13. \ | Within 2 years before you filed for bank | ruptcy, did you give any | gifts with a total value of more | than \$600 per person? | |
| ļ | No | | | | |
| | Yes. Fill in the details for each gift. | | | | |
| | Gifts with a total value of more tha per person | n \$600 Describe | the gifts | Dates you gave the gifts | Value |
| | | | | | |
| | Person to Whom You Gave the Gift | | | | |
| | Number Street | | | | |
| | City State Zip | Code | | | |
| | Person's relationship to you | | | | |
| | Person to Whom You Gave the Gift | | | | |
| | - 1 200 to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | |
| | Number Street | | | | |
| | | Code | | | |
| | Person's relationship to you | | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 45 of 68

| Debtor ¹ | 1 Juanita | | Braggs | Case number (if known) | |
|---------------------|---|--|---|--|------------------------|
| | First Name | Middle Name | Last Name | | |
| 14. W | ithin 2 years before you filed for | hankruntov did v | you give any gifts or contributions | s with a total value of more than \$60 | 0 to any charity? |
| 14. W | | balikruptcy, did y | ou give any gins or contributions | s with a total value of more than \$60 | o to any chanty: |
| ✓ | No | | | | |
| | Yes. Fill in the details for each | gift or contribution | n. | | |
| | Gifts or contributions to chari | ties | Describe what you contribute | d Date you | Value |
| | that total more than \$600 | | - | contributed | |
| | | | | | |
| | Charity's Name | | | | |
| | , | | | | |
| | | - | | | |
| | Number Street | | | | |
| | | | | | |
| | City State | Zip Code | | | |
| | . | | | | |
| Part 6: | List Certain Losses | | | | |
| | | | | | |
| | - | ankruptcy or sinc | e you filed for bankruptcy, did yo | ou lose anything because of theft, fire | e, other disaster, or |
| ya _ | ambling? | | | | |
| | No | | | | |
| V | Yes. Fill in the details. | | | | |
| _ | Describe the property you lost | t and | Describe any insurance cover | age for the loss Date of your | Value of property |
| | how the loss occurred | | Include the amount that insuran | • | lost |
| | | | pending insurance claims on line | e 33 of <i>Schedule</i> | |
| | | | A/B: Property. | | |
| | 2013 Chevrolet Malibu Car Accid | dent | No insurance Coverage | 03/2017 | \$10000.00 |
| Part 7: | List Certain Payments or T | | | | |
| | oout seeking bankruptcy or prepa | aring a bankrupto | y petition? | behalf pay or transfer any property to bes required in your bankruptcy. | o anyone you consulted |
| | out seeking bankruptcy or prepactude any attorneys, bankruptcy pet No | aring a bankrupto | y petition? | | o anyone you consulted |
| | out seeking bankruptcy or prepa clude any attorneys, bankruptcy per No | aring a bankrupto | y petition? | | o anyone you consulted |
| Ind | out seeking bankruptcy or prepa clude any attorneys, bankruptcy per No | aring a bankrupto | y petition? | ces required in your bankruptcy. | |
| Ind | out seeking bankruptcy or prepa clude any attorneys, bankruptcy per No | aring a bankrupto | ey petition? credit counseling agencies for service | ces required in your bankruptcy. Date payment or transfer | |
| Ind | out seeking bankruptcy or prepactude any attorneys, bankruptcy per No Yes. Fill in the details. | aring a bankrupto | ey petition? credit counseling agencies for service. Description and value of any properties. | property Date payment or transfer was made | t Amount of payment |
| Ind | cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm | aring a bankrupto | ey petition? credit counseling agencies for service. Description and value of any properties. | ces required in your bankruptcy. Date payment or transfer | t Amount of |
| Ind | cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | aring a bankrupto | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm | aring a bankrupto | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street | aring a bankrupto | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | aring a bankrupto | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | clude any attorneys, bankruptcy or prepactude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois | aring a bankrupto | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | aring a bankrupto | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | clude any attorneys, bankruptcy or prepactude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois | aring a bankrupto | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | clude any attorneys, bankruptcy or prepactude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State | aring a bankrupto | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | clude any attorneys, bankruptcy or prepactude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address | aring a bankrupto tition preparers, or o 60603 Zip Code | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | Cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None | aring a bankrupto tition preparers, or o 60603 Zip Code | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | Cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None | aring a bankrupto tition preparers, or o 60603 Zip Code | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid | aring a bankrupto tition preparers, or o 60603 Zip Code | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | clude any attorneys, bankruptcy or prepactude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, | aring a bankrupto tition preparers, or o 60603 Zip Code | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid | aring a bankrupto tition preparers, or o 60603 Zip Code | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid | 60603 Zip Code | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | cout seeking bankruptcy or prepactude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid | aring a bankrupto tition preparers, or o 60603 Zip Code | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | clude any attorneys, bankruptcy or prepactude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid Number Street City State | 60603 Zip Code | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |
| Ind | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid | 60603 Zip Code | ey petition? credit counseling agencies for service Description and value of any patransferred | property Date payment or transfer was made | t Amount of payment |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 46 of 68

| Debt | | Juanita | | Braggs | Case number (ii | known) | |
|------|--------------|--|-------------------------|---|------------------------|--|----------------------------------|
| | | First Name | Middle Name | Last Name | | | _ |
| 17. | help | nin 1 year before you filed you deal with your credit not include any payment or | tors or to make paym | | ur behalf pay or tra | nsfer any property to a | nyone who promised to |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | | | Description and value of a transferred | ny property | Date payment or transfer was made | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | Inclu and | transfers that you have alrea | and transfers made as s | security (such as the granting of a | security interest or n | nortgage on your propert | y). Do not include gifts |
| | Ш | Yes. Fill in the details. | | | | | |
| | | | | Description and value of protransferred | | be any property or nts received or debts p nange | Date aid transfer was made |
| | | Person Who Received Trans | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to yo | Zip Code u | | | | |
| | | Person Who Received Tran | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to yo | Zip Code u | | | | |
| 9. | ben | nin 10 years before you file eficiary? ese are often called asset-pro | | d you transfer any property to a | self-settled trust o | or similar device of whi | ch you are a |
| | | No | · | | | | |
| | Ш | Yes. Fill in the details. | | Description and value of | the property transfe | erred | Date transfer was made |
| | | Name of trust | | | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 47 of 68

Debtor 1 Juanita Braggs Case number (if known) First Name Middle Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 48 of 68

| | | Bra | | | se number (if known) | |
|------------|---|--|--|--------------------|---|----------------|
| | First Name Middle Name | e Las | st Name | | | |
| rt 9: | Identify Property You Hold or Contr | rol for Someone | e Else | | | |
| | , , , | | | | | |
| | you hold or control any property that son | neone else owns? | ? Include any | property you b | orrowed from, are storing for, or hold in | trust for |
| 501 | neone. | | | | | |
| ✓ | No | | | | | |
| Ħ | Yes. Fill in the details. | | | | | |
| | | Whore is the | ne property? | | Describe the contents | Value |
| | | where is th | ie property: | | Describe the contents | value |
| | Owner's Name | Number Stre | net . | | | |
| | owner o reality | rambor on o | .01 | | | |
| | Number Street | | | | | |
| | | | | | | |
| | | City | State | Zip Code | | |
| | | _ | | · | | |
| | City State Zip Code | | | | | |
| | Circ Dataile About Environmental | lufa was ati a u | | | | |
| t 10: | Give Details About Environmental | Information | | | | |
| the | ourpose of Part 10, the following definitions | apply: | | | | |
| | sarpood or rait ro, and rollowing dominioned | ωρ.,. | | | | |
| | Environmental law means any federal, state, o | | | | | |
| | azardous or toxic substances, wastes, or ma | | | . • | | |
| ır | ncluding statutes or regulations controlling th | ie cleanup of these | e substances, | wastes, or mater | 181. | |
| = 5 | Site means any location, facility, or property as | s defined under any | y environmen | tal law, whether y | you now own, operate, or utilize it | |
| C | r used to own, operate, or utilize it, including | g disposal sites. | | | | |
| - / | dazardous material means anything an enviro | nmental law define | es as a hazard | ous waste, hazai | rdous substance. | |
| | oxic substance, hazardous material, pollutant | | | | , | |
| | | | | | | |
| port a | Il notices, releases, and proceedings that you | iknow about roga | | | | |
| | , , , , , , , , , , , , | a Kilow about, lega | ardless of whe | n they occurred. | | |
| | , | a kilow about, lega | ardless of whe | n they occurred. | | |
| Ha | s any governmental unit notified you that | | | - | | ? |
| Ha | s any governmental unit notified you that | | | - | | ? |
| Ha | s any governmental unit notified you that | | | - | | ? |
| Ha: | s any governmental unit notified you that | | | - | | ? |
| Ha: | s any governmental unit notified you that | | e or potentia | - | | Date of |
| Ha: | s any governmental unit notified you that | you may be liable | e or potentia | - | or in violation of an environmental law | |
| Ha: | s any governmental unit notified you that No Yes. Fill in the details. | you may be liable Governmen | e or potentia | - | or in violation of an environmental law | Date of |
| Ha | s any governmental unit notified you that | you may be liable | e or potentia | - | or in violation of an environmental law | Date of |
| Ha: | s any governmental unit notified you that No Yes. Fill in the details. Name of site | Government | e or potentia ntal unit | - | or in violation of an environmental law | Date of |
| Ha: | s any governmental unit notified you that No Yes. Fill in the details. | you may be liable Governmen | e or potentia ntal unit | - | or in violation of an environmental law | Date of |
| Ha: | s any governmental unit notified you that No Yes. Fill in the details. Name of site | Government Government NumberStree | e or potentia ntal unit tal unit | lly liable under | or in violation of an environmental law | Date of |
| Ha: | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street | Government | e or potentia ntal unit | - | or in violation of an environmental law | Date of |
| Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site | Government Government NumberStree | e or potentia ntal unit tal unit | lly liable under | or in violation of an environmental law | Date of |
| Ha: | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street | Government Government NumberStree | e or potentia ntal unit tal unit | lly liable under | or in violation of an environmental law | Date of |
| | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street | Government Government NumberStree | e or potentia ntal unit tal unit et | Ily liable under | or in violation of an environmental law | Date of |
| | No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of a | Government Government NumberStree | e or potentia ntal unit tal unit et | Ily liable under | or in violation of an environmental law | Date of |
| | No No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of a | Government Government NumberStree | e or potentia ntal unit tal unit et | Ily liable under | or in violation of an environmental law | Date of |
| | No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of a | Government Government NumberStree | e or potentia ntal unit tal unit et | Ily liable under | or in violation of an environmental law | Date of |
| | No No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of a | Government Government NumberStree | e or potentia ntal unit tal unit et State | Ily liable under | or in violation of an environmental law | Date of notice |
| | No No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of a | Government Government NumberStree City any release of haz | e or potentia ntal unit tal unit et State | Ily liable under | or in violation of an environmental law | Date of notice |
| | No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details. | Government Government NumberStreet City any release of haz | e or potentia ntal unit tal unit et State zardous mate | Ily liable under | or in violation of an environmental law | Date of notice |
| | No No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of a | Government Government NumberStree City any release of haz | e or potentia ntal unit tal unit et State zardous mate | Ily liable under | or in violation of an environmental law | Date of notice |
| | No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details. | Government Government City Government Government Government | e or potentia ntal unit tal unit et State zardous mate | Ily liable under | or in violation of an environmental law | Date of notice |
| | No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details. | Government Government NumberStreet City any release of haz | e or potentia ntal unit tal unit et State zardous mate | Ily liable under | or in violation of an environmental law | Date of notice |
| | No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details. | Government Government NumberStreet City Government Government NumberStreet | e or potentia ntal unit tal unit et State zardous mate ntal unit tal unit | Zip Code | or in violation of an environmental law | Date of notice |
| | No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details. | Government Government City Government Government Government | e or potentia ntal unit tal unit et State zardous mate | Ily liable under | or in violation of an environmental law | Date of notice |
| | No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details. | Government Government NumberStreet City Government Government NumberStreet | e or potentia ntal unit tal unit et State zardous mate ntal unit tal unit | Zip Code | or in violation of an environmental law | Date of notice |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 49 of 68

| Deb | | Juanita | | | Braggs | Case | e number <i>(ii</i> | fknown) | | |
|------|------|---|--|--|---|--------------------|---------------------|-------------------------------------|------------|--------------------|
| | | First Name | N | Middle Name | Last Name | | | | | |
| 26. | Hav | | / in any judici | al or administra | ative proceeding unde | er any environmen | ital law? In | clude settlements a | and orders | 3. |
| | | No Yes. Fill in the det | ails. | | | | | | | |
| | | | | 1 | Court or agency | | Nature o | of the case | | Status of the case |
| | | Case title | | | Court Name | | | | | Pending |
| | | Case number | | i | NumberStreet | | | | | On appeal |
| | | | | i | City State | Zip Code | | | | Concluded |
| Part | 11: | Give Details Ab | out Your Bu | usiness or Co | nnections to Any B | usiness | | | | |
| 27. | Witl | hin 4 years before | you filed for b | ankruptcy, did | you own a business o | or have any of the | following c | onnections to any b | business? | |
| | | A member of A partner in a An officer, di An owner of a | a limited liabi a partnership rector, or mar at least 5% of bove applies | lity company (Laging executive the voting or each of the control o | ide, profession, or oth LC) or limited liability pe of a corporation quity securities of a codetails below for each | partnership (LLP) | ull-time or p | oart-time | | |
| | Ч | | | | | ture of the busine | ss | Employer Identific | | |
| | | | | | | | | include Social Se | curity nun | nber or ITIN. |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | Name of accour | ntant or bookkeep | er | Dates business e | xisted | |
| | | City | State | Zip Code | | | | From | То | <u>—</u> |
| | | | | | Describe the na | ture of the busine | SS | Employer Identificinclude Social Se | | |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | Name of accour | ntant or bookkeep | er | Dates business e | xisted | |
| | | City | State | Zip Code | _ | | | From | То | |
| | | | | | Describe the na | ture of the busine | SS | Employer Identificinclude Social Se | | |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | Name of accour | ntant or bookkeep | er | Dates business e | xisted | |
| | | City | State | Zip Code | _ | • | | From | То | |
| | | | | | | | | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 50 of 68

| Deb | tor 1 | Juanita | | | Braggs | Case number (if known) |
|------|------------|---|----------------|--|---|--|
| | | First Name | | Middle Name | Last Name | |
| 28. | | hin 2 years before ditors, or other pa | - | bankruptcy, did you | ı give a financial statement | to anyone about your business? Include all financial institutions, |
| | ✓ | No | | | | |
| | | Yes. Fill in the de | etails below. | | | |
| | | | | | Date issued | |
| | | Name | | | MM/DD/YYYY | |
| | | | | | | |
| | | Number Street | | | | |
| | | City | State | Zip Code | | |
| | | • | State | Zip Code | | |
| Part | t 12: | Sign Below | | | | |
| 1 | true a | and correct. I und kruptcy case car | derstand that | making a false stat es up to \$250,000, o | ement, concea ^l ling property r imprisonment for up to 20 | its, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | | ture of Debtor | 0 | | Signature of Debtor 2 |
| | | _ | | | | Date |
| | | Date | 3/15/2018 | | | |
| ı | Did y | ou attach additio | nal pages to | Your Statement of F | inancial Affairs for Individu | als Filing for Bankruptcy (Official Form 107)? |
| | / | lo | | | | |
| i | Y | 'es | | | | |
| ı | Did y | ou pay or agree t | o pay someo | ne who is not an atto | orney to help you fill out ba | nkruptcy forms? |
| ı | ✓ N | lo | | | | |
| | <u> </u> | es. Name of perso | on | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 51 of 68

| Fill in this infor | mation to identify your c | ase: | |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Juanita | | Braggs |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. | | | | | |
|----|---|--|---|--|--|--|
| | Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | | |
| | Creditor's name: Santander Consumer USA Description of property securing debt: 2014 Ford Fusion | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. ✓ Yes. | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and | No. Yes. | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 52 of 68

| Debtor | Juanita | | Braggs | Case number (if | |
|----------|------------------------------|-------------------------|------------------------|----------------------------------|--|
| 1 | First Name | Middle Name | Last Name | known) | |
| Part 2: | List Your Unexpired I | Personal Property Lease | s | | |
| informa | tion below. Do not list re | | leases are leases that | are still in effect; the lease p | ases (Official Form 106G), fill in the eriod has not yet ended. You may |
| Des | scribe your unexpired per | rsonal property leases | | Will | the lease be assumed? |
| Les | sor's name: | | | <u> </u> | No Yes |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | <u>-</u> | No Yes |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | <u>—</u> | No Yes |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | 느 느 | No Yes |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | <u> </u> | No Yes |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | ''' | No Yes |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | 느 느 | No Yes |
| | cription of leased perty: | | | | |
| Part 3: | Sign Below | | | | |
| Unde | | | ny intention about any | property of my estate that se | cures a debt and any personal |
| y | /s/ Juanita Braggs | | × | | |
| _ | gnature of Debtor 1 | | | gnature of Debtor 2 | |
| | ate 3/15/2018 | | | ate | |
| 5 | MM/DD/YYYY | | 5. | MM/DD/YYYY | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Page 53 of 68 Document

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Distric | Ct of illifiois | |
|------|--|-------------------------------|---|----------------------------------|
| n re | Juanita Braggs | | Case No. | |
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 7 |
| | DISCLOSURE OF | COMPENSATIO | N OF ATTORNEY F | FOR DEBTOR |
| 1 | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of the | petition in bankruptcy, or agreed t | to be paid to me, for services |
| | For legal services, I have agreed to ac | cept | | \$1,850.00 |
| | Prior to the filing of this statement I h | nave received | | \$1,000.00 |
| | Balance Due | | | \$850.00 |
| 2 | . The source of the compensation paid | I to me was: | | |
| | ✓ Debtor | Other (specify) | | |
| 3 | . The source of the compensation paid | I to me is: | | |
| | Debtor | Other (specify) | | |
| 4 | ey are | | | |
| | | v firm. A copy of the agreeme | th a other person or persons who ent, together with a list of the nam | |
| 5 | . In return for the above-disclosed fee, | I have agreed to render lega | al service for all aspects of the ban | kruptcy case, including: |
| | a. Analysis of the debtor's finan- bankruptcy; | cial situation, and rendering | advice to the debtor in determining | ng whether to file a petition in |
| | b. Preparation and filing of any p | oetition, schedules, stateme | nts of affairs and plan which may | be required; |
| | c. Representation of the debtor | at the meeting of creditors a | and confirmation hearing, and any | adjourned hearings thereof; |
| 6 | . By agreement with the debtor(s), the | above-disclosed fee does no | ot include the following services: | |
| | | | | |
| | | CERTIFIC | ATION | |
| | I certify that the foregoing is a complet tor(s) in this bankruptcy proceedings. | e statement of any agreemer | nt or arrangement for payment to | me for representation of the |
| | 3/15/2018 | | /s/ Elise Harmening | |
| - | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | • | | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---------|---------|--------------------|
| + \$550 | | administrative fee |
| | \$1.717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 58 of 68

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Braggs, Juanita | Case No. | Case No. | | |
|-----------------|---|--|-------------------------------------|--|--|
| Debtor(s) | | Ouse No. | | | |
| | | Chapter. | Chapter7 | | |
| | VERIFICA | TION OF CREDITOR MAT | RIX | | |
| Th knowledge | ne above named Debtors hereby verify the. | nat the attached list of creditors is tru | ue and correct to the best of their | | |
| Date: | 3/15/2018 | /s/ Braggs, Juani Braggs, Juanita Signature of Deb | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 59 of 68

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

FIFTH THIRD BANK PO Box 9013 Addison, TX, 75001

NORDSTROM/TD BANK USA PO BOX 6555 ENGLEWOOD, CO, 80155

TD BANK USA/TARGETCRED PO Box 660170 Dallas, TX, 75266

COMENITYBANK/VICTORIA 220 W SCHROCK RD WESTERVILLE, OH, 43081

DISCOVER FIN SVCS LLC PO Box 3025 New Albany, OH, 43054

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

SYNCB/VALUE CITY FURNI 950 FORRER BLVD KETTERING, OH, 45420

CBNA Po Box 6497 Sioux Falls, SD, 57117

MCYDSNB 3911 S Walton Walker Blvd Dallas, TX, 75265

COMENITY BANK/CARSONS 1314 PINELOG ROAD AIKEN, SC, 29803 KAY JEWELERS 1903 Southlake Mall Merrillville, IN, 46410

CHASE CARD BANK ONE CARD SERV 2500 WESTFIELD DRI ELGIN, IL, 60124

SYNCB/WALMART Po Box 530927 Atlanta, GA, 30353

AFNI, INC. PO Box 3517 Bloomington, IL, 61702

RECEIVABLES PERFORMANC 20816 44th Ave W Lynnwood, WA, 98036

SYNCB/OLD NAVY Po Box 530942 Atlanta, GA, 30353

Hertz Rent A Car 10401 N Pennsylvania Ave Oklahoma City, OK, 73120

John H. Stroger, Jr. Hospital of Cook County PO Box 70121 Chicago, IL, 60673

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC \$1,850.00 in attorney fees plus costs in the amount of \$335.00 to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding. \$350.00/hr.

Adding additional bills \$31.00

Motion to Reopen and Avoid Lien \$1000.00

Motion to Reopen \$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC . Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

3/15/2018 Case 18-07546 Doc 1 Filed 03/15/18_{11 C}Entered 03/15/18 14:49:04 Desc Mai

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Date: 03/15/2018

*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 63 of 68

| | Braggs | Case number (if knowi | ٦/ |
|---|--|--|--|
| | | | |
| 16a. Are your debts primaril "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril money for a business or No. Go to line 16c. Yes. Go to line 17. | ly consumer debts al primarily for a pe ly business debts? investment or thro | rsonal, family, or housel Business debts are deb ugh the operation of the | nold purpose." ets that you incurred to obtain e business or investment. |
| Yes. I am filing under Chapte | er 7. Do you estimate | that after any exempt pro | |
| ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 5,001- | 10,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$10,00 \$50,00 | 0,001-\$50 million 0,001-\$100 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| ☐ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$10,00 \$50,00 | 0,001-\$50 million 0,001-\$100 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| | | | |
| correct. If I have chosen to file under Confittle 11, United States Code under Chapter 7. If no attorney represents me an out this document, I have obtain I request relief in accordance volumerstand making a false st connection with a bankruptcy both. 18 U.S.C. §§ 152, 1841. /// Juanita Braggs. /// Signature of Debtor 1 Executed on 3/15/2018 | Chapter 7, I am awa e. I understand the and I did not pay or ained and read the vith the chapter of atement, concealin case can result in 1 1519, and 3571. | re that I may proceed, if relief available under eac agree to pay someone w notice required by 11 U. title 11, United States C g property, or obtaining | eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed tho is not an attorney to help me fill S.C. § 342(b). Ode, specified in this petition. money or property by fraud in imprisonment for up to 20 years, or |
| | "incurred by an individual "incurred by an individual "No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril money for a business or No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts yes. Go to line 17. 16c. State the type of debts yes. I am filing under Chapte expenses are paid that Yes. I am filing under Chapte expenses are paid that Yes. 1-49 So-99 So-\$50,000 \$50-\$50,000 \$500,001-\$100,000 \$500,001-\$100,000 \$500,001-\$1 million \$0-\$500,000 \$500,001-\$1 million I have examined this petition, so correct. If I have chosen to file under Cof title 11, United States Code under Chapter 7. If no attorney represents me an out this document, I have obtal request relief in accordance version with a bankruptcy both. 18 U.S.C. §§ 152, 1841, Signature of Debtor 1 Executed on 3/15/2018 | estions for Reporting Purposes 16a. Are your debts primarily consumer debts "incurred by an individual primarily for a pe No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? money for a business or investment or thro No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are no No. I am not filing under Chapter 7. Go to line 18. Yes. I am filing under Chapter 7. Do you estimate expenses are paid that funds will be availabed No. Yes. 1-49 100-199 100-199 100-199 200-999 \$5,001-\$100,000 \$100,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million \$0-\$50,000 \$500,001-\$100,000 \$1,000 \$100,001-\$500,000 \$100,001-\$500,000 \$100,001-\$100,000 \$100,000 | estions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are or "incurred by an individual primarily for a personal, family, or housed "No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debt money for a business or investment or through the operation of the money for a business or investment or through the operation of the money for a business or investment or through the operation of the money for a business or investment or through the operation of the money for a business or investment or through the operation of the money for a business or investment or through the operation of the money for a business or investment or through the operation of the money for a business or investment or through the operation of the money for a business of business are debt so business or business are paid that funds will be available to distribute to unsecure expenses are paid that funds will be available to distribute to unsecure of the part of t |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 64 of 68

| -10.00 | | | | |
|---------------------------------|--|--|---|---|
| | mation to identify your o | ase: | | |
| Debtor 1 | Juanita | | Braggs | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ |
| - | | | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number | | | (Glate) | |
| (If known) | | | | (655294) |
| Official I | Form 106De | <u> PC</u> | | Check if this is ar amended filing |
| Declarati | on About an | Individual Debte | or's Schedules | 12/15 |
| If two married p | people are filing togeth | er, both are equally respon | sible for supplying correct | information. |
| money or prope | nis form whenever you t erty by fraud in connect 1341, 1519, and 3571. | ile bankruptcy schedules o ion with a bankruptcy case | r amended schedules, Ma can result in fines up to \$ | king a false statement, concealing property, or obtaining \$250,000, or imprisonment for up to 20 years, or both. 18 |
| Part 1: Sign | Below | | | |
| Pro F. T | | | _ | |
| Dia you pa | ly or agree to pay some | one who is NOT an attorne | y to help you fill out bank | ruptcy forms? |
| ✓ No | | | | |
| Yes. N | lame of person | | Attach Bankruptcy P | letition Preparer's Notice, Declaration, and |
| in in the second | | | Signature (Official Fo | rm 119). |
| | | | | |
| | | | | |
| | | | | |
| | are true and correct. | e that I have read the sumr | × | of Debtor 2 |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 65 of 68

| Debtor | 1 Juanita | | Braggs | Case number (ifknown) |
|--------------|---|--------------------------------------|--|--|
| | First Name | Middle Name | Last Name | |
| 28. W | ithin 2 years before yo editors, or other partic | u filed for bankruptcy, did y es. | ou give a financial state | nent to anyone about your business? Include all financial institutions, |
| | No Yes. Fill in the details | s below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | _ |
| | Number Street | | | |
| | City | State Zip Code | | |
| Part 12 | Sign Below | | | |
| true a ba | and correct. I understankruptcy case can res | anita Braggs of Debtor 1 | atement, concealing proj or imprisonment for up t | ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date viduals Filing for Bankruptcy (Official Form 107)? |
| | Yes | | | |
| Did | you pay or agree to pa | y someone who is not an a | ttorney to help you fill ou | t bankruptcy forms? |
| 7 | No | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 66 of 68

| Debtor | Juanita | | Braggs | Case number (if | | | | |
|---------------|--|--|------------------------------|--|--|--|--|--|
| 1 | First Name | Middle Name | Last Name | known) | | | | |
| Part 2: | List Your Unexpired Perso | onal Property Leases | | | | | | |
| informa | For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). | | | | | | | |
| Des | scribe your unexpired personal | property leases | | Will the lease be assumed? | | | | |
| Les | sor's name: | | | No Yes | | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | No Yes | | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | No Final Yes | | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | No Yes | | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | Yes | | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | No Yes | | | | |
| | cription of leased perty: | | | | | | | |
| | sor's name: | | | No Yes | | | | |
| | cription of leased perty: | | | | | | | |
| | Sign Below | | | | | | | |
| Unde prope | r penalty of perjury, I declare terty that is subject to an unexp | that I have indicated my pired lease. | y intention about any proper | ty of my estate that secures a debt and any personal | | | | |
| | s/ Juanita Braggs | n ON S | Signature | of Debtor 2 | | | | |
| Da | ate 3/15/2018 MM/DD/YYYY | V | Date MN | 1/DD/YYYY | | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 67 of 68

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Braggs, Juanita Debtor(s) | Case No | Case No. | | | |
|---|----------------------------|---|--|--|--|--|
| | | Chapter. | Chapter7 | | | |
| | VER | IFICATION OF CREDITOR MAT | TRIX | | | |
| The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of knowledge. | | | | | | |
| Date: | 3/15/2018 | /s/ Braggs, Juar Braggs, Juanita Signature of Dea | THE TOTAL STATE OF THE PARTY OF | | | |

Case 18-07546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:49:04 Desc Main Document Page 68 of 68

| Debtor 1 Juanita First Name | Middle None | Braggs | Case number (if i | nown) | |
|---|--|---|-------------------------------|---|---------------------------------|
| rifst Name | Middle Name | Last Name | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| 8. Unemployment compensations of the second | ou contend that the amount re | eceived was a benefit | \$0.00 | | _ |
| For you | | \$0.00 | | | |
| For your spouse | | \$0.00 | | | |
| 9. Pension or retirement inco benefit under the Social Sect | | unt received that was a | \$0.00 | *************************************** | ~ |
| payments received as a victir | benefits received under the Some of a war crime, a crime again orism. If necessary, list other s | ocial Security Act or est humanity, or | | | |
| Total amounts from separate | pages, if any, | | +\$0.00 | + | _ |
| 11. Calculate your total curr | | es 2 through 10 for | \$4,446,28 | + | = \$4,446,28 |
| each column. Then add the total | al for Column A to the total for | Column B. | | | |
| Part 2: Determine Wheth | er the Means Test Applie | es to Vou | | | Total current monthly income |
| 2. Calculate your current me | | | | | |
| - | monthly income from line 11. | • | Cor | oy line 11 here → | \$4,446.28 |
| Multiply by 12 (the nur | nber of months in a year). | | · | • | X 12 |
| | al income for this part of the fo | om. | | 12 | |
| · | · | | | | ψ30,033.00 |
| 3 Calculate the median fami | ly income that applies to yo | u. Follow these steps: | | | |
| Fill in the state in which you | live. | Illinois | | | |
| Fill in the number of people i | n your household. | 2 | | | |
| Fill in the median family inco- household. | me for your state and size of | | | 1 | 3. \$67,254.00 |
| instructions for this form. Th | edian income amounts, go on is list may also be available at t | | | | · |
| 4. How do the lines compare | | | | - A | |
| Go to Part 3. | an or equal to line 13. On the t | | | | |
| | nan line 13. On the top of pag Il out Form 122A-2. | e 1, check box 2, The | presumption of abuse is deter | nined by Form 122A-2. | |
| anes Sign Below | | | | | |
| | | | | | |
| By signing here, I declare un | nder penalty of perjury that the | information on this sta | atement and in any attachment | is is true and correct. | |
| /s/ Juanita Braggs Signature of Debtor 1 | Juleanth 12 | LAND 3 | Signature of Debtor 2 | | |
| Date 3/15/2018 MM/DD/YYYY | | | Date 3/15/2018 MM/DD/YYYY | | |
| | do NOT fill out or file Form 122 fill out Form 122A-2 and file it | | | | |